Statement of Deficiencies	**(X1) Provider/Supplier/CLIA Identification Number**	**(X3) Date Survey Completed**
	31D2004346	07/22/2026
Name of Provider or Supplier	**Street Address, City, State**	
Dermatology Center Of New Jersey,Pc, The	745 Us Hwy 202/206, Ste 102, Bridgewater, NJ	

For information on the provider's plan to correct this deficiency, please contact the provider or the state survey agency.

(X4) ID Prefix Tag	Summary Statement of Deficiencies
D5217	EVALUATION OF PROFICIENCY TESTING PERFORMANCE CFR(s): 493.1236(c)(1) At least twice annually, the laboratory must verify the accuracy of any test or procedure it performs that is not included in subpart I of this part. This STANDARD is not met as evidenced by: Based on the review of the Biannual Assessments (BA) records and interview with the Office Manager (OM) the laboratory failed to verify the accuracy of Histopathology testing biannually in the calendar year 2025. The finding includes: 1. There was no documented evidence the laboratory verified the accuracy of histopathology testing in the calendar year 2025. 2. The OM confirmed on 7-22-26 11am, the laboratory did not verify the accuracy of Histopathology testing in the calendar year 2025.
D5787	TEST RECORDS CFR(s): 493.1283(a) (a) The laboratory must maintain an information or record system that includes the following: (a)(1) The positive identification of the specimen. (a)(2) The date and time of specimen receipt into the laboratory. (a)(3) The condition and disposition of specimens that do not meet the laboratory's criteria for specimen acceptability. (a)(4) The records and dates of all specimen testing, including the identity of the personnel who performed the test(s). This STANDARD is not met as evidenced by: Based on the lack of an Accession Log (AL) and interview with Office Manager (OM), the laboratory failed to maintain an information or record system for Mohs tests performed from from 1/1/26 to 7/22/26. The findings include: 1. The laboratory did not have an AL for 2026 2. The OM confirmed on 7/22/26 at 11:00 pm, the

	laboratory did not have an information or record sytem that ensured positive patient idenification through all phases of Mohs testing performed.